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**CONFIDENTIAL
FACSIMILE TRANSMITTAL SHEET****DATE SENT:** August 9, 2005**DELIVER TO:****Name:** Examiner Carolyn Fatimah**Company:** USPTO / Group Art Unit 2152**Fax No:** 571-273-8300**FROM:** Jaclyn A. Schade **YOUR FILE:** 09/928,347

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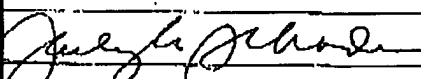
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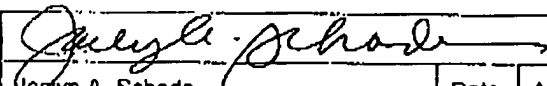
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| | | | |
|---|----------------------|------------------------|-----------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/928,347 | |
| | Filing Date | 8/14/2001 | |
| | First Named Inventor | Pestoni et al. | |
| | Art Unit | 2152 | |
| | Examiner Name | C. FATIMAH | |
| Total Number of Pages in This Submission | 17 | Attorney Docket Number | ARC920010018US1 |

| ENCLOSURES (Check all that apply) | | |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
| Firm Name | Lacasse & Associates, LLC | |
| Signature |  | |
| Printed Name | Jaclyn A. Schade | |
| Date | August 9, 2005 | Reg. No. 50,569 |

| CERTIFICATE OF TRANSMISSION/MAILING | | |
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| Signature |  | |
| Typed or printed name | Jaclyn A. Schade | Date August 9, 2005 |

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09/928,347

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AUG 09 2005

In re Application of: Pestoni et al.

Serial No.: 09/928,347

Group Art Unit: 2152

Filed: 8/14/2001

Examiner: Carolyn Fatimah

Title: *Collaborative Content Programming*

AMENDMENT AFTER FINAL

MS AF

Commissioner for Patents

P.O. Box 1450

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Sir:

In response to the outstanding office action of 5/9/2005, please amend the above-identified application as follows: